

EDS - PROVIDER LAYOUTS

FIELD NAME	FIELD SIZE	FORMAT	TABLE NAME	FIELD	DESCRIPTION	NOTES
PROVIDER ADDRESS INFORMATION						
Provider ID	9	Char	T_PR_PROV	ID_PROVIDER	The provider identification number used by the provider.	
Service Location	1	Char	T_PR_SVC_LOC	CDE_SERVICE_LOC	Suffix added to the provider number to identify the various locations that a provider does business.	
Provider County	2	Char	T_PR_SVC_LOC	CDE_COUNTY	Numeric representation of county in the state of Indiana.	
Provider Name	39	Char	T_PR_NAM	NAME	This is the name associated with an organization or person.	For each Service Address (per cde_service_loc)
Provider Address1	30	Char	T_PR_ADR	ADR_MAIL_STRT1	Mailing address street 1. This is a street address for a provider.	For each Service Address (per cde_service_loc)
Provider Address2	30	Char	T_PR_ADR	ADR_MAIL_STRT2	Mailing address street 2. This is a street address for a provider.	For each Service Address (per cde_service_loc)
Provider City	15	Char	T_PR_ADR	ADR_MAIL_CITY	Mailing address city. This is the city where a provider would receive business mail.	For each Service Address (per cde_service_loc)
Provider State	2	Char	T_PR_ADR	ADR_MAIL_STATE	Mailing address state. This is the state where a provider would receive business mail.	For each Service Address (per cde_service_loc)
Provider Zipcode	5	Char	T_PR_ADR	ADR_MAIL_ZIP	Mailing address zip code. This is the first 5 digits of the zip code for a business mailing zip code.	For each Service Address (per cde_service_loc)
Provider Zipcode Ext	4	Char	T_PR_ADR	ADR_MAIL_ZIP_4	Mailing address zip code + 4. This is the last 4 digits of a zip code.	For each Service Address (per cde_service_loc)
Provider Phone Number	10	Char	T_PR_ADR	NUM_PHONE	This is a phone number in the format area code + prefix + suffix	For each Service Address (per cde_service_loc)
Provider Primary Specialty	3	Char	T_PR_TYPE	CDE_PROV_SPEC_PRIM	This field contains the provider specialty which is the main focus of the provider's practice. Each provider type must have a primary specialty and the primary specialty must be one of the provider's existing specialties.	
License Number	10	Char	T_PR_TYPE	NUM_PROV_LIC	A provider license number.	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	

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FIELD NAME	FIELD SIZE	FORMAT	TABLE NAME	FIELD	DESCRIPTION	NOTES
PROVIDER MCO NETWORK INFORMATION						
Provider ID	9	Char	T_PR_PROV	ID_PROVIDER	The provider identification number used by the provider. (Convert sak_prov to id_provider by linking to the t_pr_prov table.)	
Network	9	Char	T_MCO	ID_MCO	MCO system assigned key to uniquely identify a MCO within the system. (Convert sak_mco to id_mco by linking to the t_mco table).	
Network Enrollment Date	8	Date	T_MCO_PR_NETWORK	DTE_EFFECTIVE	The date the provider became a member of the Managed Care Organization.	
Network Disenrollment Date	8	Date	T_MCO_PR_NETWORK	DTE_END	The date that the provider ended membership with the Managed Care Organization.	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	
PROVIDER SERVICE LOCATION ELIGIBILITY INFORMATION						
Provider ID	9	Char	T_PR_PROV	ID_PROVIDER	The provider identification number used by the provider. (Convert sak_prov to id_provider by linking to the t_pr_prov table.)	
Service Location	1	Char	T_PR_SVC_ELIG	CDE_SERVICE_LOC	Suffix added to the provider number to identify the various locations that a provider does business.	
Provider Enrollment Date	8	Date	T_PR_SVC_ELIG	DTE_EFFECTIVE	Effective date for a providers program eligibility. Used to signify the start of a span or period of program eligibility.	
Provider Disenrollment Date	8	Date	T_PR_SVC_ELIG	DTE_END	The date that a providers program eligibility is no longer in effect.	
Enrollment Status	1	Char	T_PR_SVC_ELIG	CDE_ENROLL_STATUS	This is the letter assigned to the enrollment status description to uniquely identify it. Examples of valid values are: R=Retired, D=Deceased, M=Return Mail, I=Term by IFSSA, H=Term by HCFA, B=Term by HPB, and A=Active.	
Program	2	Char	T_PUB_HLTH_PGM	CDE_PGM_HEALTH	Uniquely identifies each State program. 590, ARCH, Medicaid. (Link on sak_pub_hlth to get cde_pgm_health from t_pub_hlth_pgm table.)	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	

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FIELD NAME	FIELD SIZE	FORMAT	TABLE NAME	FIELD	DESCRIPTION	NOTES
PROVIDER SPECIALTY INFORMATION						
Provider ID	9	Char	T_PR_PROV	ID_PROVIDER	The provider identification number used by the provider. (Convert sak_prov to id_provider by linking to the t_pr_prov table.)	
Service Location	1	Char	T_PR_SPEC	CDE_SERVICE_LOC	Suffix added to the provider number to identify the various locations that a provider does business.	
Provider Type	2	Char	T_PR_SPEC	CDE_PROV_TYPE	This is the provider type that a provider is licensed for.	
Provider Specialty	3	Char	T_PR_SPEC	CDE_PROV_SPEC	A code representing the specialized area of practice for a provider.	
Specialty Effective Date	8	Date	T_PR_SPEC	DTE_EFFECTIVE	The date the specialty of the provider becomes valid (effective).	
Specialty End Date	8	Date	T_PR_SPEC	DTE_END	The date the specialty of the provider is no longer valid (effective).	
Provider Sub-specialty	3	Char	T_PR_SPEC	CDE_PROV_SUBSPEC	A designation indicating the scope of practice or operations of the provider within a provider specialty.	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	
PROVIDER TAX ID INFORMATION						
Provider ID	9	Char	T_PR_PROV	ID_PROVIDER	The provider identification number used by the provider. (Convert sak_prov to id_provider by linking to the t_pr_prov table.)	
Service Location	1	Char	T_PR_TAX_ID	CDE_SERVICE_LOC	Suffix added to the provider number to identify the various locations that a provider does business.	
Tax ID	9	Char	T_PR_TAX_ID	NUM_TAX_ID	This is the tax identification number assigned to the provider by the Internal Revenue Service.	
Tax ID Effective Date	8	Date	T_PR_TAX_ID	DTE_EFFECTIVE	Effective date for the provider tax id.	
Tax ID End Date	8	Date	T_PR_TAX_ID	DTE_END	End date for the provider tax id.	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	

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FIELD NAME	FIELD SIZE	FORMAT	TABLE NAME	FIELD	DESCRIPTION	NOTES
GROUP PROVIDER INFORMATION						
Group Service Location	1	Char	T_PR_GRP_MBR	CDE_SERVICE_LOC	The Group Provider's Service Location	
Effective Date	8	Date	T_PR_GRP_MBR	DTE_EFFECTIVE	Date the provider is effective with this group.	
End Date	8	Date	T_PR_GRP_MBR	DTE_END	Date the provider is no longer effective with this group.	
Provider Type	2	Char	T_PR_GRP_MBR	CDE_PROV_TYPE	This is the provider type that the provider is licensed for. (RENDERING PROVIDER)	
License Number	10	Char	T_PR_GRP_MBR	NUM_PROV_LIC	The Rendering Provider's license number.	
Primary Specialty	3	Char	T_PR_GRP_MBR	CDE_PROV_SPEC_PRIM	This field contains the primary provider specialty for the Rendering Provider, which is the main focus of the provider's practice.	
Group ID	9	Char	T_PR_PROV	ID_PROVIDER_GROUP	The Group Provider's Number	
ID Provider	9	Char	T_PR_PROV	ID_PROVIDER	The Rendering Provider's Number	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	
PROVIDER PANEL SIZE INFORMATION						
ID Provider	9	Char	T_PR_PROV	ID_PROVIDER	(Convert sak_prov to id_provider).	
Panel Size Effective Date	8	Date	T_PMP_PANEL_SIZE	DTE_EFF_PANEL_SZ	This is the effective date of the current PMP panel size. Current policy states that the panel size can only be adjusted annually.	
Panel Size End Date	8	Date	T_PMP_PANEL_SIZE	DTE_END	The date that the PMP panel size is no longer valid for a PMP.	
Max. Number of Recipients	9	Numeric	T_PMP_PANEL_SIZE	NUM_MAX_RECIPS	This field contains the maximum number of recipients allowed for a Primary Medical Provider. The minimum is 150 and the maximum is 2000.	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	
PROVIDER UPIN INFORMATION						
ID Provider	9	Char	T_PR_PROV	ID_PROVIDER	(Convert sak_prov to id_provider).	
UPIN (Univ. Provider Id. No.)	6	Char	T_PR_PROV	NUM_UPIN	This is the universal provider identification number.	
Provider Classification	1	Char	T_PR_PROV	CDE_PROV_CLASS	Denotes the classification of the provider (B - Billing, R- Rendering Only, G- Group, D - Dual-Role)	
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	

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FIELD NAME	FIELD SIZE	FORMAT	TABLE NAME	FIELD	DESCRIPTION	NOTES
PROVIDER PMP ENROLLMENT INFORMATION						
ID Provider	9	Char	T_PR_PROV	ID_PROVIDER	(Convert sak_prov to id_provider).	
Enrollment Change Date	8	Date	T_PMP_ENROLL_PGM	DTE_MC_PRG_CHANGE		
Enrollment Program	1	Char	T_PMP_ENROLL_PGM	CDE_HEALTH_SUBPGM		
Enrollment End Date	8	Date	T_PMP_ENROLL_PGM	DTE_END		
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	
PROVIDER PMP LOC INFORMATION						
ID Provider	9	Char	T_PR_PROV	ID_PROVIDER	(Convert sak_prov to id_provider).	
Group ID	9	Char	T_PR_PROV	ID_PROVIDER_GROUP	(Convert sak_prov_group to id_provider_group by linking to t_pr_prov).	
Service Location	1	Char	T_PMP_SVC_LOC	CDE_SERVICE_LOC	Suffix added to the provider number to identify the various locations that a provider does business.	
Loc Program	1	Char	T_PMP_SVC_LOC	CDE_HEALTH_SUBPGM	This is an identify used to identify a medical assistance subprogram. Currently the provider is enrolled in PCCM or RBMC.	
Loc Effective Date	8	Date	T_PMP_SVC_LOC	DTE_EFFECTIVE	This is the effective date for pmp for this managed care program and service location.	
Loc End Date	8	Date	T_PMP_SVC_LOC	DTE_END	This is the end date for pmp for this managed care program and service location.	
Loc Immun Ind	1	Char	T_PMP_SVC_LOC	IND_IMMUN	Indicates if the pmp would be willing to receive immunizations free of charge and only be reimbursed for an administrativefee.	
Loc Admit Privileges Cde	1	Char	T_PMP_SVC_LOC	CDE_ADMIT_PRIV	Identifies those pmp providers that have hospital admitting privileges.	
Loc Deliv Privileges Ind	1	Char	T_PMP_SVC_LOC	CDE_DELIV_PRIV	Identifies those pmp providers that have hospital delivery privileges.	
Loc Spec Serv Ind	1	Char	T_PMP_SVC_LOC	IND_SPEC_SERV		
Loc CSHCN Ind	1	Char	T_PMP_SVC_LOC	IND_CSHCN		
Loc Spec Cond Ind	1	Char	T_PMP_SVC_LOC	IND_SPEC_COND		
Loc Family Practice Ind	1	Char	T_PMP_SVC_LOC	IND_FMLY_PRAC		
Loc Obstetrics Ind	1	Char	T_PMP_SVC_LOC	IND_OBSTETRICS		
Loc Age Restriction Cde	2	Char	T_PMP_SVC_LOC	CDE_AGE_RESTR		
Loc Manage Care Ind	1	Char	T_PMP_SVC_LOC	IND_MANAGE_CARE		
Loc Women Only Ind	1	Char	T_PMP_SVC_LOC	IND_WOMEN_ONLY		
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	

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FIELD NAME	FIELD SIZE	FORMAT	TABLE NAME	FIELD	DESCRIPTION	NOTES
RECIPIENT / PROVIDER PMP ASSIGNMENT INFORMATION						
Recipient ID	12	Char	T_RE_BASE	ID_MEDICAID	(Convert sak_recip to id_medicaid).	
Service Location	1	Char	T_RE_PMP_ASSIGN	CDE_SERVICE_LOC	Suffix added to the provider number to identify the various locations that a provider does business.	
PMP Enrollment Date	8	Date	T_RE_PMP_ASSIGN	DTE_EFFECTIVE	The effective date when a recipient began utilizing this provider as a PMP. This date can not be prior to the recipient's Medicaid eligibility date.	
PMP Disenrollment Date	8	Date	T_RE_PMP_ASSIGN	DTE_END	The date that the recipient is no longer utilizing this provider as a PMP.	
PMP Program	1	Char	T_RE_PMP_ASSIGN	CDE_HEALTH_SUBPGM	Identifies the program this PMP accepted enrollment of this recipient into: PCCM or RBMC. Managed Care policy states that a PMP can only accept enrollment into one program at a time. The valid values for this field are:	
PMP MCO	9	Char	T_MCO	ID_MCO	Provider system-assigned key to uniquely identify a Managed Care Organization (MCO) within the system. This is the RBMC programs MCO, that the PMP is affiliated with. (Convert sak_mco to id_mco by linking to the t_mco table).	
Region	1	Char	T_RE_PMP_ASSIGN	CDE_STATE_REGION	This is the code that designates the MCO regions that are currently active in the managed care RBMC program.	
PMP Start Reason	2	Char	T_RE_PMP_ASSIGN	CDE_RSN_MC_START	Indicates the reason a recipient's PMP segment for managed care eligibility was started. These codes are carried on table t_re_pmp_reason.	
PMP Stop Reason	2	Char	T_RE_PMP_ASSIGN	CDE_RSN_MC_STOP	Indicates the reason a recipient's PMP segment for managed care eligibility was stopped. These codes are carried on table t_re_pmp_reason.	
Indicator Recipient Letter	1	Char	T_RE_PMP_ASSIGN	IND_RECIP_LTR	This is the indicator to tell whether or not the confirmation letter has been sent to the recipient on this assignment.	
PMP Assignment Date	8	Date	T_RE_PMP_ASSIGN	DTE_ADDED	Date the recipient was assigned to a PMP.	
Provider ID	9	Char	T_PR_PROV	ID_PROVIDER	(Convert sak_prov to id_provider).	
Group Provider ID	9	Char	T_PR_PROV	ID_PROVIDER_GROUP	(Convert sak_prov_group to id_provider_group).	Available if prov is a group prov
Carriage Return	1	Hex	n/a	n/a	1 byte for return at end of line	